

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

Heartland Values PAC

ADDRESS (number and street)

PO Box 505

☐Check if different
than previously
reported. (ACC)

Sioux Falls

SD

57101

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00409003

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☒January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 5

2 0 0 8

through

1 2

3 1

2 0 0 8

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Barb J Buell, Deputy Treasurer

Signature of Treasurer

Electronically Filed by Barb J Buell, Deputy Treasurer

Date

0 1

2 9

2 0 0 9

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	5	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		353676.72
(b) Cash on Hand at Beginning of Reporting Period	181291.45	
(c) Total Receipts (from Line 19)	7126.65	376855.74
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	188418.10	730532.46
7. Total Disbursements (from Line 31)	20344.00	562458.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	168074.10	168074.10
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name
Heartland Values PAC

Report Covering the Period:

From:

M M D D Y Y W Y
1 1 2 5 2 0 0 8

To:

M M D D Y Y W Y
1 2 3 1 2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6000.00	262870.00
(i) Itemized (use Schedule A)	25.00	46598.00
(ii) Unitemized	6025.00	309468.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	1000.00	56900.00
(c) Other Political Committees (such as PACs)	7025.00	366368.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	101.65	5487.74
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7126.65	376855.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7126.65	376855.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	15344.00	362458.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	15344.00	362458.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	182500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	1500.00
29. Other Disbursements.....	0.00	16000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20344.00	562458.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20344.00	562458.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	7025.00	366368.00
34. Total Contribution Refunds (from Line 28(d))	0.00	1500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7025.00	364868.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15344.00	362458.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15344.00	362458.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Martin E Janis

Mailing Address 401 N Michigan Ave Ste 2920

City

Chicago

State

IL

Zip Code

60611-5592

FEC ID number of contributing
federal political committee.

C

Name of Employer
Martin E Janis & CO Inc

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 8

Transaction ID: 90112.C23718

Amount of Each Receipt this Period

1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Carmen C Schieffer

Mailing Address 48036 Indian Ridge Ct

City

Sioux Falls

State

SD

Zip Code

57108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 9 / 2 0 0 8

Transaction ID: 90112.C23717

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

6000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 19

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Xcel Energy Employee PAC

Mailing Address 801 Pennsylvania Ave NW Ste 212

City

Washington

State

DC

Zip Code

20004-2677

FEC ID number of contributing
federal political committee.**C** C00107771

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	8

Transaction ID: 81204.C23715

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 19

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)

Charles Schwab & Co Inc

Mailing Address 101 Montgomery St

City

San Francisco

State

CA

Zip Code

94104-4104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5391.95

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 8

Transaction ID: 90112.C23720

Amount of Each Receipt this Period

65.20

Interest Received

B.

Full Name (Last, First, Middle Initial)

Charles Schwab & Co Inc

Mailing Address 101 Montgomery St

City

San Francisco

State

CA

Zip Code

94104-4104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5428.40

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90112.C23719

Amount of Each Receipt this Period

36.45

Interest Received

SUBTOTAL of Receipts This Page (optional)

101.65

TOTAL This Period (last page this line number only)

101.65

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Barb Buell

Mailing Address 224 N Phillips Ave Ste 210

City State Zip Code
Sioux Falls SD 57104-6062

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2340
Date of Disbursement

/ /

Amount of Each Disbursement this Period

269.36

PAYROLL

B.

Full Name (Last, First, Middle Initial)
Van Brunt on Phillips LLC

Mailing Address 3130 W 57th St Ste 112

City State Zip Code
Sioux Falls SD 57108-3126

Purpose of Disbursement
PAC Office Rent

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2329
Date of Disbursement

/ /

Amount of Each Disbursement this Period

104.36

PAC OFFICE RENT

C.

Full Name (Last, First, Middle Initial)
The LS Group

Mailing Address 912 F St NW Apt 1106

City State Zip Code
Washington DC 20004-1451

Purpose of Disbursement
PAC Fundraising Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2343
Date of Disbursement

/ /

Amount of Each Disbursement this Period

1041.67

PAC FUNDRAISING CONSULTANT

SUBTOTAL of Disbursements This Page (optional)

1415.39

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) E-Online Data	Transaction ID: 90112.E2334 Date of Disbursement
Mailing Address 280 Fore St	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 4 / 2 0 0 8</div> </div>
City Portland State ME Zip Code 04101-4177 Purpose of Disbursement Credit Card Service Fee Candidate Name	Amount of Each Disbursement this Period <div>35.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD SERVICE FEE
B. Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: 90112.E2349 Date of Disbursement
Mailing Address 224 N Phillips Ave Ste 210	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City Sioux Falls State SD Zip Code 57104-6062 Purpose of Disbursement Payroll Candidate Name	Amount of Each Disbursement this Period <div>269.35</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL
C. Full Name (Last, First, Middle Initial) Midcontinent Communications	Transaction ID: 90112.E2346 Date of Disbursement
Mailing Address PO Box 5010	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 0 / 2 0 0 8</div> </div>
City Sioux Falls State SD Zip Code 57117-5010 Purpose of Disbursement Utilities Candidate Name	Amount of Each Disbursement this Period <div>94.62</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	UTILITIES

SUBTOTAL of Disbursements This Page (optional)

398.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360002	Transaction ID: 90112.E2331 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div>
City Fort Lauderdale State FL Zip Code 33336-0002 Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>8462.73</div> CREDIT CARD: SEE BELOW
B. Full Name (Last, First, Middle Initial) Aristotle International Inc Mailing Address 205 Pennsylvania Ave SE City Washington State DC Zip Code 20003-1182 Purpose of Disbursement Software Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90112.E2355 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>750.00</div> [MEMO ITEM] MEMO: SOFTWARE SUPPORT
C. Full Name (Last, First, Middle Initial) Courtyard Marriott Mailing Address 1901 W End Ave City Nashville State TN Zip Code 37203-2308 Purpose of Disbursement Lodging Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90112.E2354 Date of Disbursement <div> <div>12</div> <div>01</div> <div>2008</div> </div> Amount of Each Disbursement this Period <div>168.57</div> [MEMO ITEM] MEMO: LODGING

SUBTOTAL of Disbursements This Page (optional) ►

8462.73

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) FedEx	Transaction ID: 90112.E2350 Date of Disbursement
Mailing Address 942 S Shady Grove Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City Memphis State TN Zip Code 38120-4117 Purpose of Disbursement Shipping Charges Candidate Name	Amount of Each Disbursement this Period <div>46.65</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: SHIPPING CHARGES </div>
B. Full Name (Last, First, Middle Initial) Frontier Airlines	Transaction ID: 90112.E2361 Date of Disbursement
Mailing Address 7001 Tower Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City Denver State CO Zip Code 80249-7312 Purpose of Disbursement Airline Service Candidate Name	Amount of Each Disbursement this Period <div>704.38</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: AIRLINE SERVICE </div>
C. Full Name (Last, First, Middle Initial) Hertz	Transaction ID: 90112.E2351 Date of Disbursement
Mailing Address PO Box 10067-WA	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City Macon State GA Zip Code 31297- Purpose of Disbursement Car Rental Candidate Name	Amount of Each Disbursement this Period <div>322.76</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<div> [MEMO ITEM] MEMO: CAR RENTAL </div>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Northwest Airlines

Mailing Address 7500 Airline Dr

City Minneapolis State MN Zip Code 55450-1101

Purpose of Disbursement
Airline Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2357

Date of Disbursement

12 / 01 / 2008

Amount of Each Disbursement this Period

2935.50

[MEMO ITEM]

MEMO: AIRLINE TRAVEL

B.

Full Name (Last, First, Middle Initial)
Qdoba

Mailing Address 555 11th St NW

City Washington State DC Zip Code 20004-1300

Purpose of Disbursement
PAC Event Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2359

Date of Disbursement

12 / 01 / 2008

Amount of Each Disbursement this Period

327.25

[MEMO ITEM]

MEMO: PAC EVENT CATERING

C.

Full Name (Last, First, Middle Initial)
TiVo

Mailing Address PO Box 2160

City Alviso State CA Zip Code 95002-2160

Purpose of Disbursement
DVR Subscription

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2360

Date of Disbursement

12 / 01 / 2008

Amount of Each Disbursement this Period

12.95

[MEMO ITEM]

MEMO: DVR SUBSCRIPTION

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC**A.**Full Name (Last, First, Middle Initial)
USPS

Mailing Address Main Post Office

City State Zip Code
Sioux Falls SD 57104-7500Purpose of Disbursement
PAC Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90112.E2356

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	8

Amount of Each Disbursement this Period

4.75

[MEMO ITEM]

MEMO: PAC POSTAGE

B.Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address 300 Josephine St

City State Zip Code
Denver CO 80206-4234Purpose of Disbursement
Airline Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90112.E2358

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	8

Amount of Each Disbursement this Period

3083.99

[MEMO ITEM]

MEMO: AIRLINE TRAVEL

C.Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 360002

City State Zip Code
Fort Lauderdale FL 33336-0002Purpose of Disbursement
Credit Card Service Fee

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 90112.E2325

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	6		2	0	0	8

Amount of Each Disbursement this Period

0.71

CREDIT CARD SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)

0.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) Van Brunt on Phillips LLC	Transaction ID: 90112.E2330 Date of Disbursement
Mailing Address 3130 W 57th St Ste 112	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City State Zip Code Sioux Falls SD 57108-3126	Amount of Each Disbursement this Period
Purpose of Disbursement Utilities	<div> <div></div> <div>0.60</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	UTILITIES
B. Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: 90112.E2328 Date of Disbursement
Mailing Address 224 N Phillips Ave Ste 210	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 8 / 2 0 0 8</div> </div>
City State Zip Code Sioux Falls SD 57104-6062	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll	<div> <div></div> <div>269.36</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	PAYROLL
C. Full Name (Last, First, Middle Initial) The LS Group	Transaction ID: 90112.E2339 Date of Disbursement
Mailing Address 912 F St NW Apt 1106	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 5 / 2 0 0 8</div> </div>
City State Zip Code Washington DC 20004-1451	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Fundraising Consultant	<div> <div></div> <div>1041.67</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	PAC FUNDRAISING CONSULTANT

SUBTOTAL of Disbursements This Page (optional)

1311.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) First National Bank	Transaction ID: 90112.E2348 Date of Disbursement
Mailing Address 100 N Phillips Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 3 1 / 2 0 0 8</div> </div>
City State Zip Code Sioux Falls SD 57104-6715	Amount of Each Disbursement this Period
Purpose of Disbursement Bank Service Fee Candidate Name	<div> <div>3.15</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	BANK SERVICE FEE
B. Full Name (Last, First, Middle Initial) Bon Vivant Catering	Transaction ID: 90112.E2332 Date of Disbursement
Mailing Address 6330 Dunman Way	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 8</div> </div>
City State Zip Code Alexandria VA 22315-5505	Amount of Each Disbursement this Period
Purpose of Disbursement PAC Event Catering Candidate Name	<div> <div>1760.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAC EVENT CATERING
C. Full Name (Last, First, Middle Initial) First National Bank	Transaction ID: 90112.E2335 Date of Disbursement
Mailing Address 100 N Phillips Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 1 0 / 2 0 0 8</div> </div>
City State Zip Code Sioux Falls SD 57104-6715	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Service Fee Candidate Name	<div> <div>12.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD SERVICE FEE

SUBTOTAL of Disbursements This Page (optional)

1775.15

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A. Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: 90112.E2337 Date of Disbursement																				
Mailing Address PO Box 660351	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	1		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	1		2	0	0	8												
City Ogden State UT Zip Code 84201-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">403.74</td> </tr> </table>	403.74																			
403.74																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAYROLL TAXES																				
B. Full Name (Last, First, Middle Initial) Barb Buell	Transaction ID: 90112.E2342 Date of Disbursement																				
Mailing Address 224 N Phillips Ave Ste 210	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	6		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	6		2	0	0	8												
City Sioux Falls State SD Zip Code 57104-6062	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Candidate Name	<table border="1"> <tr> <td colspan="10">444.75</td> </tr> </table>	444.75																			
444.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAYROLL																				
C. Full Name (Last, First, Middle Initial) The LS Group	Transaction ID: 90112.E2327 Date of Disbursement																				
Mailing Address 912 F St NW Apt 1106	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	8		2	0	0	8												
City Washington State DC Zip Code 20004-1451	Amount of Each Disbursement this Period																				
Purpose of Disbursement PAC Fundraising Consultant Candidate Name	<table border="1"> <tr> <td colspan="10">1041.67</td> </tr> </table>	1041.67																			
1041.67																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	PAC FUNDRAISING CONSULTANT																				

SUBTOTAL of Disbursements This Page (optional)

1890.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
Sprint

Mailing Address Customer Service

City State Zip Code
Taunton MA 02780-

Purpose of Disbursement
Phone Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 90112.E2345

Date of Disbursement

/ /

Amount of Each Disbursement this Period

57.34

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional)

57.34

TOTAL This Period (last page this line number only)

15312.08

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Heartland Values PAC

A.

Full Name (Last, First, Middle Initial)
David Vitter for US Senate

Mailing Address 2900 Clearview Pkwy Ste 206

City Metairie State LA Zip Code 70006-6532

Purpose of Disbursement

Candidate Name
DAVID VITTER

Office Sought: ☐ House
☒ Senate
☐ President

State: LA District: 00

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 90112.E2344

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00